



## Supplemental Application Data Sheet

### Application Information

Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Computer Readable Form (CRF)?:: No  
Title:: PCR SAMPLE PREPARATION HOLDER  
AND METHOD

Attorney Docket Number:: 028338-0117 038519-0107

Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure:: 1  
Total Drawing Sheets:: 10  
Small Entity?:: No  
Petition included?:: No  
Secrecy Order in Parent Appl.?:: No

### Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Drew Chapman  
Family Name:: Brown  
City of Residence:: Baltimore Towson  
State or Province of MD  
Residence::  
Country of Residence:: US

**Street of mailing address::** ~~719 Brinkwood Road~~ 4 Waterway Court, Apt. 2D  
Towson, MD 21286

**City of mailing address::** ~~Baltimore~~ Towson

**State or Province of mailing address::** MD

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** US

**Status::** Full Capacity

**Given Name::** Carrie Lynn

**Family Name::** Holmes

**City of Residence::** Bel Air

**State or Province of Residence::** MD

**Country of Residence::** US

**Street of mailing address::** 1858 Oxford Square  
Bel Air, MD 21015

**Country of mailing address::** US

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** US

**Status::** Full Capacity

**Given Name::** Eric Scott

**Family Name::** Clasen

**City of Residence::** Hillsborough

**Country of Residence::** US

**Street of mailing address::** 12A Meadowbrood Drive  
Hillsborough, NJ 08844

**Country of mailing address::** US

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** ~~US~~ NZ

**Status::** Full Capacity

**Given Name::** Richard Karl

**Family Name::** Pallo  
**City of Residence::** New Hope  
**State or Province of** PA  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 111 Pinewood Circle  
New Hope, PA 18938  
**Country of mailing address::** US

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Michael Joseph  
**Family Name::** Rello  
**City of Residence::** Harleysville  
**State or Province of** PA  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 156 Eastwoods Drive  
Harleysville, PA 19438  
**Country of mailing address::** US

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Lisa  
**Family Name::** Miller  
**City of Residence::** Cockeysville  
**State or Province of** MD  
**Residence::**  
**Country of Residence::** US  
**Street of mailing address::** 306 Wellingborough Way, Apt. F  
Cockeysville, MD 21030

**Country of mailing address::** US

**Applicant Authority Type::** Inventor

**Primary Citizenship Country::** US

**Status::** Full Capacity

**Given Name::** Tiffany

**Family Name::** Howland

**City of Residence::** Pasadena

**State or Province of** MD

**Residence::**

**Country of Residence::** US

**Street of mailing address::** 1685 Belhaven Woods Court  
Pasadena, MD 21122

**Country of mailing address::** US

#### **Correspondence Information**

**Correspondence Customer Number::** 22428

**E-Mail address::** PTOMailWashington@Foley.com

#### **Representative Information**

|   |       |  |
|---|-------|--|
| <b>Representative Customer<br/>Number::</b> | 22428 |  |
|---|-------|--|

**Domestic Priority Information**

| <b>Application::</b> | <b>Continuity Type::</b>                                | <b>Parent Application::</b> | <b>Parent Filing Date::</b> |
|----------------------|---|-----------------------------|-----------------------------|
| This Application     | An application claiming the benefit under 35 USC 119(e) | 60/430,994                  | 12/04/2002                  |

**Foreign Priority Information**

| <b>Country::</b> | <b>Application number::</b> | <b>Filing Date::</b> | <b>Priority Claimed::</b> |
|------------------|-----------------------------|----------------------|---------------------------|
|                  |                             |                      |                           |

**Assignee Information**

**Assignee name::** SMITHS DETECTION-EDGEWOOD, INC.